

Please sign in the appropriate space below to indicate acceptance or rejection of the modifications to the sub-slab depressurization system (SSDS) and associated vapor intrusion sampling for your property presented in the letter dated December ##, 2015 and discussed during a meeting held on the same date:

I agree to and **ACCEPT** the described SSDS modifications and associated sampling.

Name

Signature

Date

I have reviewed the above information and **DECLINE** the described SSDS modifications and associated sampling.

Name

Signature

Date